

TIPTON
URBAN DISTRICT COUNCIL.



Annual Report
OF THE
Medical Officer of Health
AND
School Inspector,

A. S. UNDERHILL, M.D., D.P.H.,
For the Year 1909,

WITH
Supplementary Reports

BY
C. H. CLIFTON, C.S.I., A.R.S.I., Inspector of Nuisances,
AND
WM. H. JUKES, C.E., Surveyor.



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Tipton Urban District Council.



34TH ANNUAL REPORT

OF THE

Medical Officer of Health.



*To the Chairman and Members of the Tipton Urban
District Council.*

Great Bridge,

January, 1910.

Mr. Chairman and Gentlemen,

I have pleasure in presenting to you my 34th Annual Report, together with a Supplementary Report from Mr. Jukes, our Surveyor, and Mr. Clifton, our Sanitary Inspector.

I am directed to report upon the condition of the district generally, with its surroundings and details as to its inhabitants, including many matters of interest only to those who are unacquainted with the district, and which to those who know, the particulars may seem to be redundant.

The Parish of Tipton consists of two separate townships, that of Tipton Green and of Great Bridge; inter-communication is easy and free, but naturally each township has its own partisans. Most of the ironstone and coal which formerly made Tipton so famous has been worked out, but little of the deep coal has been gotten; this, however, lies at too great a depth to allow of its being gotten advantageously. All over

the district are canals, with branches in many instances connected with the works. Iron is still being made, but the output as compared with former years is much lessened as we have to depend upon other districts for the raw materials. Railway accommodation is ample and easy of access, the Great Western Railway Company has recently much enlarged and improved their depôt at Great Bridge. Our chief products are of iron and steel, we also manufacture the Mond gas, make bricks, telegraphic and other insulators, and many other smaller necessities in manufacturing and commercial industries. Much of the ground is broken and irregular from mining subsidences, thus making it exceedingly difficult to keep water, gas, and sewerage mains from being broken.

The general condition of the population is good, the amount of distress generally will favourably compare with other mining and ironworking districts. The streets are broad, there is but little overcrowding, and there are few courts and alleys. We have but little Consumption and have practically no work which is *per se* injurious to health. Altogether the workpeople have plenty of good and healthy work by which to gain their daily bread. One great drawback is that employers are afraid of giving work to men who are not in the prime of life, the Workmen's Liability Acts preclude employment to any who from causes outside their own control are in any way hampered in their physical condition.

There are plenty of good and sanitary houses for the working classes, supplied with a regular and adequate quantity of water from the mains of the South Staffordshire Water Works. There are also many houses for clerks, managers, foremen, and professional men. The more recently built of the houses are furnished with a bathroom and other sanitary conveniences; it is, however, a matter for regret that so many houses are now spoilt by giving up valuable house-room to a drawing-room which is seldom used, is always more or less damp from want of fire and ventilation, and uses up air space so essential to the welfare of the children and growing-up young people of the family. As a rule there is plenty of air space round the houses, but in a few instances the closets and ashpits are lamentably near to the dwelling rooms and the approaches to the house. This we hope to rectify by a more general adoption of the ash-pan system, and when the sewers are ready by converting the closets into water closets.

No houses can now be built until the plans have been submitted, through the Surveyor, to the Plans Committee, and these are not passed unless the requirements of the Council bye-laws are complied with. After they are built they should be inspected by the Surveyor, who gives the owners a certificate of satisfaction. They are afterwards inspected from time to time by the Sanitary Inspector, who reports to the Sanitary Committee any infringement of the bye-laws and obtains from it an order for the necessary alterations and improvements to be made. It is a matter for regret that in so many yards tenanted by several families there is so great a difficulty in getting the tenants to keep their surface drains clear. In many instances there is a nuisance caused by soap-suds and surface drainage lying decomposing around the houses, where the fault is not in the landlord having supplied adequate means for carrying off the drainage, but in the tenants not being careful by throwing unsuitable stuff into the yard and neglecting the cleaning down of the drains until they become choked.

The water supply of the district is ample, continuous, and pure. During the summer months the streets are systematically watered by the official water carts. Throughout the past year no complaints have been made as to shortage in any part of the district. It is not possible for any pollution to get at the mains; the plumbo-solvent action of the water is practically nil, the water being naturally somewhat hard with a full percentage of lime held in solution. There are a few wells still used in the parish, the water from these when discovered is analysed, and if the supply is not pure the wells are closed. I have analysed three samples during the year, all of which were contaminated and unfit for use.

The milk supply is partly from Cowsheds and Dairies in the district and partly by train from farmers in Derbyshire and Staffordshire. At present we have 45 Dairies and 50 Cowsheds on the register. These are regularly and systematically inspected. Our two great difficulties are that a cowshed will be registered for a certain number of cows, very soon, however, a visit will show that the number of cows has been increased beyond what is allowed by the bye-laws; and, secondly, that the cow-keepers will not use the ventilators. I have made many inspections during the year with the Sanitary Inspector, and found the stench from

several of the sheds to be unbearable. This is most unwholesome to the cows, and deteriorates the milk that they produce. As a rule they have a good water supply and their sanitary surroundings are fair. We are trying to get, in many of the sheds, a more frequent removal of the excreta, but it is very difficult to do much with the older cow-houses; prejudice and tradition seem to me to be more rampant with milk-dealers than with any other class of men. I occasionally examine the milk sold from outside farms, and often examine the utensils which convey it. They have invariably been clean and fit for their purpose; in no case is any milk sold when there is reason to suspect that a cow is suffering from Tuberculosis.

Bedside the **food** exposed for sale in the various shops, we have open markets in Great Bridge and in Tipton. Much of the meat sold in these markets is poor, and of little nutritious value. The Sanitary Inspector regularly visits these markets—I have gone when from any information received we have reason to suspect that unsound cattle have been bought at any of the surrounding cattle sales. We have also inspected cattle before and after killing, the Sanitary Inspector in some cases has watched the animals being killed. The meat sold has been under special supervision during the year, but in no case have we seen distinct evidence of tuberculosis on meat exposed for sale. At one abattoir where there are a large number of pigs killed the proprietors at once acquaint the Inspector if any of the pigs are not quite sound. The carcass is kept for inspection, and is destroyed at once if there is any evidence of disease.

We have 24 **slaughter-houses** in the parish, all of which are in fairly good order and comply with the bye-laws. These have been visited at times of slaughtering, and have been regularly inspected, and the proprietors have always carried out any directions given to them to improve the sanitary conditions of the premises. The Inspector has no special certificate in meat inspection, but has the Certificate of the Royal Sanitary Institute. He informs me that during his inspections he has found 23 carcasses, or portions of carcasses, diseased with tuberculosis, all of which have been destroyed.

As a rule the places where other articles of food are made or stored are clean and suitable for their purpose.

We have on the register 22 **bake-houses**, all of these have been inspected and are kept in accordance with the bye-laws. There are no underground bake-houses.

The **sewerage and drainage** of the district is in many places very unsatisfactory, but within the next few months the Sewerage Scheme will be in full working order, and landlords will then be compelled to make suitable connections from their properties. The present filter beds at Toll End are inadequate to deal with the volume of sewage that they have to deal with, and arrangements have been made (with the consent of the Local Government Board) to thoroughly sewer the whole district. The work has been under hand for some time now, and I hope that soon the present system of open channels and surface drains will only be used for carrying away rain water, all drainage and polluted water being carried by the deep sewers to be treated in the filter beds.

Complaints were made by the inhabitants of Great Bridge during the Summer of the foul and polluted condition of the river Rea. This had arisen from causes not very easy of abatement under the present conditions. Several of the surrounding districts had helped, besides ourselves, to pollute the stream. Arrangements have, however, now been made which will make it practically impossible for any of our sewerage to contaminate the stream, and I think that this annual nuisance will now be a matter of past history.

The provision of **public swimming and other baths** has been under full discussion by the members of the Council. There can be no doubt that such baths would be of the greatest benefit to the district generally if the people will use them. To make them, however, distinctly of use, arrangements should be made for compelling children in the upper schools to have a bath periodically. Bath drill would teach them how to swim, besides cleansing their bodies; a function which my experience as a School Medical Officer has taught me is a very much needed one in some portions of our district.

Excrement Disposal.—This is under the old plan of privy, with ventilated cesspit. These are emptied periodically by gangs of men at night, who are paid by the Council and are under the direct supervision of the Sanitary Inspector.

A portion of this is used as a manure on land situated in the Parish, and some is carried away in closed boats by canal to farms at a distance. We have a few water-closets, and are advising a more general use of them, but prejudices are hard to die out, and it will be many years before anything like a general water sewage can be instituted. Part III of the Public Health Acts Amendment Act, 1907, is in force in the district, but no action (compulsory) has as yet been taken under its provisions.

House Refuse.—Each property is provided with an ash-pit into which various kinds of house refuse and ashes are placed. A few ash-bins are in use. The scavengers, who are servants of the Council, remove these periodically under the direction of the Sanitary Inspector. The frequency of removal is guided by the requirements of the district. Where ash-bins are not in use, we are replacing the large open ash-pits by smaller ones. The Sanitary Inspector reports to the Sanitary Committee at their monthly meetings the number of loads that have been removed by the Council scavengers during the previous month.

Nuisances.—The Sanitary Inspector in the course of his daily rounds notes what nuisances exist, and reports them to the next meeting of the Sanitary Committee. After sanction by the Council, notices are served upon the owners to abate the nuisances. If the requirements are not fulfilled within a reasonable time, a final notice is sent threatening prosecution if they are not complied with. This last step, however, is not often required. During the past twelve months 143 formal notices have been served, 108 nuisances have been abated, and 35 are on our books at the present time.

Where there are difficulties in the way of the accomplishing the abatement of a nuisance, the Sanitary Inspector reports the case to me. We visit the nuisance together and take joint action. I have principally confined my reports to structural defects in properties, the closure of houses, the cases of infectious disease, water supply, and efficiency of drainage. These are embodied in a monthly report to the Sanitary Committee.

We have no **registered Lodging Houses**. If any should be opened in the future, our bye-laws are fully competent to legislate for them. As a rule, the men marry early. In some instances they live singly, or perhaps two, in a workman's house, but not in any number to make it worth while to register them as Lodging Houses.

We have but few premises upon which **offensive trades** are carried out, and in no instance during the year have any complaints been made. There has not been any difficulty in getting compliance with the Council Bye-laws by the occupiers. Our principal nuisance is from the fumes from fish frying, but this is greatly minimised by cleanliness, having a properly constructed hearth with a cowl, and good ventilation. These requirements are insisted upon by the Council, and it is only occasionally that fault can be found with the trade. The Bye-laws contain provisions for dealing with nuisances arising from any trade in the district.

At present we have 13 **Public Elementary Schools**. Their sanitary condition is not always satisfactory, but much is being done year by year to improve them. They all have a good water supply. I have referred fully in my Report as School Medical Officer to the means adopted to prevent the spread of infectious disease, and I consider that they are ample. The arrangements for the medical inspection of school children are the best that can be managed under present conditions, and every facility is given by the school teachers to make the inspection as effective as possible.

The routine plan adopted for the prevention of the spread of infectious disease is for the Sanitary Inspector to visit the case as soon as notified. If the Patient is without proper lodging or accommodation, or is a source of danger to others, it is removed to the Isolation Hospital. In very few instances have we had any real difficulty in the removal. After removal the premises are disinfected, and leaflets are given to the parents with easy instructions as to preventing the spread of the disease. If the parents are poor, disinfectants are gratuitously given, and if any clothing or bedding is so far infected as to be beyond repair it is destroyed by the Sanitary Inspector and replaced by the Council. A monthly report is made to the Sanitary Committee of all steps that have been taken that are in any way outside the ordinary

routine work. No disease but those legally notifiable is notified in the district.

I have based my calculations this year on an estimated population of 33,000. Since the last census there has been a considerable influx of young married people in the district, very many new houses have been built and all have been well occupied.

In 1871	the census was	29,428
„ 1881	„ „ „	30,013
„ 1891	„ „ „	30,503

During the year 44 houses have been built, and 20 have been closed as unfit for habitation.

The Isolation Hospital still continues to play an important part in preventing the spread of Scarlet Fever and of Typhoid Fever. No one is refused admission. If too poor to make any contribution they are admitted and treated free. If they are able to pay a little they are expected to contribute according to their means. For many years I have acted as Medical Superintendent, but any Patient can employ their own medical man if they like; this is, however, seldom done. We have accommodation for 20 Patients in two large and two small wards. This accommodation is ample for the wants of the district; we have never been full. In addition to our Isolation Hospital, we form one of the group of Sanitary Authorities which support the Wolverhampton and South Staffordshire Small-Pox Hospital, which is just outside our boundaries. We have a resident nurse, a general servant, and a woman from outside as a ward maid and laundry woman. I am empowered by the Council to employ any further nursing help which I may require in a sudden emergency.

The cases under treatment in the past eight years are as follows :—

SCARLATINA.

TYPHOID FEVER.

	1902	1903	1904	1905	1906	1907	1908	1909	1902	1903	1904	1905	1906	1907	1908	1909
January	3	6	8	2	5	0	0	7 ... 0	0	1	0	2	1	1	1	
February	10	9	8	3	0	2	1	6 ... 2	0	0	0	0	0	1	3	
March	0	15	6	1	3	12	0	5 ... 6	2	1	0	0	0	0	2	
April	... 5	11	5	0	1	9	8	7 ... 5	0	0	2	0	0	0	0	
May	... 5	12	7	1	0	7	4	1 ... 2	1	6	2	1	3	0	0	
June	... 1	11	3	0	0	2	1	3 ... 0	0	1	1	0	0	0	0	
July	... 4	14	2	0	2	2	0	4 ... 0	0	0	1	2	0	1	0	
August	0	21	7	0	0	2	8	8 ... 0	0	8	8	0	0	3	0	
Sept.	... 21	7	3	0	0	5	0	7 ... 0	0	2	5	14	0	0	0	
October	13	19	1	3	1	1	5	2 ... 0	0	3	0	1	1	9	0	
Nov.	... 14	5	0	2	5	1	2	6 ... 2	0	3	1	5	0	6	0	
Dec.	... 13	5	1	4	8	1	4	7 ... 0	5	3	2	8	6	3	0	
	89	135	51	16	25	44	33	63 ... 17	8	28	22	33	11	24	6	

1909.—Scarlatina: Admitted, 63; discharged cured, 61; died, 2.

1909.—Typhoid Fever: Admitted, 6; discharged cured, 5; died, 1.

	1902	1903	1904	1905	1906	1907	1908	1909
Cases admitted during the year	105	136	99	40	65	44	54	56
Discharged cured	82	132	74	38	48	42	42	5
Died	7	4	4	8	7	2	5	3
Now under treatment	16	7	1	7	10	3	7	7

The Hospital has not been empty during the year. One child died from Scarlatina within a few hours of admission, and one died from severe Kidney trouble during convalescence. The case of Typhoid fatal was one which was so ill on admission as practically to preclude any possibility of recovery. It has so happened this year that a large percentage of the cases of Scarlatina were very young children; this has materially increased the work of nursing and general maintenance. I am pleased, however, to state that the nurse has shewn herself to be very competent, and an indefatigable worker.

FACTORY AND WORKSHOP ACT.

Mr. Clifton is the authorised Inspector for the above Act. He and I have made many inspections during the year. There is a distinct improvement in the sanitary arrangements at the various works. No case of infectious disease has been reported from any of these places.

The number of Workshops on the register is						135
„	„	„	Factories	„	„	57
„	„	„	Workplaces	„	„	5
„	„	„	Bake-houses	„	„	22

No serious defects were found in the Dairies and Milk-shops, 4 out of the 88 Bake-houses, and 2 out of the 100 Slaughter-houses had defects, informal notice of which was given to the proprietors by the Sanitary Inspector. If they are not remedied by the time of the next inspection a prosecution will follow. 50 visits have been made to outworkers' premises, which were found to be satisfactory. No case of overcrowding was met with. As a rule the requirements of the Act have been fairly carried out. In the bakehouses many of the floors were found with tiles uneven and cracked, allowing of flour and dust to accumulate in the crevices, and so to obstruct cleansing—by degrees this will be remedied. Whitewashing is usually done within the time stipulated, and general cleanliness is an established rule. By the action of the Sanitary Inspector in Dudley Port 10 water closets have been erected in place of the old-fashioned and insanitary middens.

NOTIFICATION OF INFECTIOUS DISEASES.

During the year 199 cases of infectious disease have been notified. Of these 5 have been from Puerperal Fever, with 3 deaths. As compared with former years this seems to be an excessive number. Each case notified is, however, carefully examined as to probable cause, whether from neglect in attendance or nursing, but I have failed to discover anything of a culpable nature. I find that cases are notified now—and very properly notified—where there is any persistent rise of temperature, formerly these were overlooked, very often to the peril of the patient. Of the 94 cases of Scarlatina 63 were removed to the Hospital, and of the 19 cases of Typhoid 6 were removed.

Table showing the cases of infectious diseases notified and their mortality.

		1901		1902		1903		1904		1905	
		Noti- fied	Died	Noti- fied	Died	Noti- fied	Died	Noti- fied	Died	Noti- fied	Died
Scarlatina	...	68	2	418	28	352	10	141	0	59	0
Enteric Fever	...	28	2	48	9	24	7	52	10	52	6
Erysipelas	...	61	3	43	1	46	0	49	3	36	1
Membraneous											
Croup & Diphtheria		54	4	25	0	28	4	34	10	36	9
Puerperal Fever		0	0	0	0	5	2	5	1	2	0
Small-pox	...	0	0	0	0	*1	0	3	0	0	0
Typhus	...	0	0	0	0	0	0	0	0	0	0
		211	11	534	38	456	23	284	24	185	16

		1906		1907		1908		1909	
		Noti- fied	Died	Noti- fied	Died	Noti- fied	Died	Noti- fied	Died
Scarlatina	..	58	1	72	1	48	3	94	4
Enteric Fever	...	54	16	41	9	42	7	19	5
Erysipelas	...	35	2	32	0	42	4	37	0
Membraneous Croup		0	0	0	0	0	0	5	0
Diphtheria	...	36	8	20	0	45	1	26	5
Puerperal Fever		4	1	1	1	3	1	5	3
Small-pox	...	0	0	0	0	0	0	0	0
Typhus	...	0	0	0	0	0	0	0	*1
Tuberculosis	...	0	0	0	0	0	0	13	0
		187	28	166	11	180	16	199	18

* Diagnosis not confirmed.

INFANTILE MORTALITY.

A reference to Table V. shews that out of the 452 deaths registered 123 were infants under one year of age, giving an infant mortality rate of 115 deaths for every 1,000 births; but of these 17 were from premature birth, and 15 from defects which were congenital; 14 only were due to diarrhœal diseases, 8 were due to measles, 18 to bronchitis, and 16 to convulsions from various causes. 18 are due to wasting and debility, a larger number than we like to see, but not excessive when we take into consideration the class of mothers that we have to deal with. They cannot give that care and attention to their children that is possible for the more well-to-do class. As a rule mothers nurse their own children until teething is well advanced, very few work for their living. The infants are warmly clad, a fact which I have often noted when doing public vaccination, and most of them are kept fairly clean, as far as their stock of clothes will allow. In time I feel sure that the advent of the Queen's Nurses and

the instruction that is given by them and the pupils at the Nurses' Training Home will tend to make the mothers more careful and intelligent in the management of their infants.

ENGLAND, WALES AND TIPTON.

ANNUAL BIRTH RATES, DEATH RATES, AND THE DEATH RATES
FROM THE PRINCIPAL EPIDEMIC DISEASES.

	Annual Rates per 1,000 Living.				Deaths under One Year to 1,000 Births.
	Births.	Deaths.		Principal Epidemic Diseases.	
		Crude.	Cor- rected.		
England and Wales	25·6	14·5	14·5	1·12	109
76 Great Towns ...	25·7	14·7	15·6	1·42	118
143 Smaller Towns...	24·8	13·9	14·5	1·08	111
England and Wales less the 219 Towns)	25·6	14·5	13·6	0·80	98
Tipton	32·3	—	13·6	0·54	115

EPIDEMIC INFLUENZA.

Influenza has been very prevalent during the year, and three deaths have taken place. The disease has not taken on so epidemic a form as has previously been the case, and the symptoms have been less definite and not so severe. In very many cases the patient's throat has been very septic, and in most cases a general paresis has been the rule.

Number of deaths in the past ten years :—

1899	...	5 deaths.	1904	...	5 deaths.
1900	...	9 „	1905	...	10 „
1901	...	13 „	1906	...	5 „
1902	...	5 „	1907	...	0 „
1903	...	10 „	1908	...	3 „

Average for ten years, 6·5.

1909 ... 3 deaths.

DIPHTHERIA AND MEMBRANEOUS CROUP.

During the year 5 cases of membranous croup and 26 of diphtheria have been notified. 5 deaths have been registered from membranous croup and diphtheria combined. The clinical distinctions between these two complaints are so very slight that for practical purposes they may be classified as the same disease. Any medical man may send without payment to the Professor of Bacteriology in the Birmingham University a swab or swabs from the throat secretion, which will be bacteriologically examined, and the result sent him and to the Medical Officer of Health. The detection of the diphtheria bacillus is conclusive, but the non-detection is not so. I wish that this great help to a differential diagnosis was more commonly used, the trouble is not great and the result conduces to the adoption of more stringent sanitary precautions and more reliable sanitary statistics. At present we do not remove diphtheria cases to the Isolation Hospital, but if any case breaks out where there is a very urgent necessity for removal, special steps will be taken and the case will be admitted.

Deaths registered in the past ten years :—

1899	...	2 deaths.	1904	...	10 deaths.
1900	...	9 „	1905	...	9 „
1901	...	4 „	1906	...	8 „
1902	...	0 „	1907	...	0 „
1903	...	4 „	1908	...	1 „

Average for ten years, 4·7.

1909 ... 5 deaths.

TUBERCULOSIS.

We have no voluntary or compulsory notification of Tuberculosis, excepting that required from the Union Medical officers. During the year 12 cases have been so notified. Excluding the isolation practised in the Dudley Union Infirmary we have no system of isolation or of treatment in earlier cases of the disease. Several cases have been sent to sanatoria, and all cases of tuberculosis are allowed an extra weekly dole when reported to the Guardians. Tuberculosis either of lungs or of bones is not common in this district, we have so little overcrowding, plenty of pure air and water, and a very high elevation, and practically no process of trade which is injurious to the lungs.

PHTHISIS AND CONSUMPTION.

During the year 19 deaths have been registered. Most of these cases have attended the out-patient departments of the various Hospitals as long as they could get there, the gratuitous allowance of cod liver oil is a strong incentive to many who go there, and to others the weariness of so long suffering makes them try hospital after hospital in the hope of relief. We have, however, but few cases.

Number of deaths in the past ten years:—

1899	...	25 deaths.	1904	...	26 deaths.
1900	...	17 „	1905	...	18 „
1901	...	14 „	1906	...	15 „
1902	...	18 „	1907	...	21 „
1903	...	18 „	1908	...	15 „

Average for ten years, 18·7.

1909 ... 19 deaths.

MEASLES

have been very prevalent during the year, particularly in the Burnt Tree and Dudley Port district. As over 50% of the infants were absent from school with measles it was thought advisable to close the Infant School at Burnt Tree for two weeks in the spring, during which time the schools were thoroughly disinfected. Our working rule in cases of measles epidemic is that we close the Infants' Schools if more than 50% of the children are absent from that cause. We do not prohibit children their attendance in the higher schools if they come from a measles infected house, but do not allow any infant in school if he or she comes from an infected house. The contention is that as it is practically a young child's disorder, most of the children in the higher schools will have previously suffered from the disorder, and are not likely to become infected again. We do not admit measles into the Isolation Hospital.

Number of deaths registered during the past ten years:

1899	...	0 deaths.	1904	...	7 deaths.
1900	...	48 „	1905	...	49 „
1901	...	21 „	1906	...	1 „
1902	...	2 „	1907	...	29 „
1903	...	14 „	1908	...	0 „

Average for ten years, 17·1.

1909 ... 21 deaths.

SCARLET FEVER

has been very prevalent during the year, nor has it seemed to have visited any one portion of the district, or any time of the year, by preference. 94 cases have been notified, and 4 deaths have been registered. 63 have been admitted into the Isolation Hospital. Practically we are never free from this disease. This year most of the surrounding towns have suffered from an epidemic more or less severe. Prompt isolation of an early case has often prevented the spread to other houses. All school teachers are particularly careful to exclude children with a rash from school attendance, and do not re-admit them until at least six weeks have elapsed since the advent of the rash, and not then until all trace of peeling or of mucous discharge has disappeared.

Number of deaths in past ten years:—

1899	...	8 deaths.	1904	...	0 deaths.
1900	...	3 „	1905	..	0 „
1901	...	2 „	1906	...	1 „
1902	...	28 „	1907	...	1 „
1903	...	10 „	1908	...	3 „

Average for ten years, 5·3.

1909 ... 4 deaths.

			1902	1903	1904	1905	1906	1907	1908	1909
Notified	418	352	141	59	58	72	48	94
Admitted into Hospital	80	132	51	16	22	46	30	63

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WHOOPIING COUGH.

Two deaths have been reported ; it has not been epidemic this year. Isolation in the cottages is impossible. No child is allowed into school who has the characteristic cough. The disease by itself is seldom fatal, but the lung complications are of the most deadly nature. Two fatal cases are reported.

Deaths registered in the past ten years ;—

1899	...	2 deaths.	1904	...	10 deaths.
1900	...	9 „	1905	...	9 „
1901	...	4 „	1906	...	8 „
1902	...	0 „	1907	...	0 „
1903	...	4 „	1908	...	15 „

Average for ten years, 6·1.

1909 ... 2 deaths.

TYPHOID FEVER.

During the year 19 cases have been notified, 5 have been removed to the Isolation Hospital, and 5 have died. The cases notified have not been confined to any one district, nor has there been any one common cause discoverable. Whatever unsanitary conditions have been found, have been at once rectified. It is often most difficult to satisfy oneself as to the cause of an outbreak.

Number of deaths registered in the past ten years :—

1899	...	8 deaths.	1904	...	10 deaths.
1900	...	12 „	1905	...	5 „
1901	...	8 „	1906	...	16 „
1902	...	9 „	1907	...	9 „
1903	...	7 „	1908	...	7 „

Average for ten years, 9·1.

1909 ... 5 deaths.

SMALL POX AND VACCINATION.

No case of small pox has been notified. The last case was in 1895. I have been unable to obtain precise data as to protection afforded by efficient vaccination in the district. I know that a large percentage of children have been vaccinated, but in the majority of cases in only one place a most unsatisfactory proceeding, affording but little protection, and only for a limited time. It cannot be too well known that efficient vaccination or protection bears a direct ratio to the number and character of the resultant cicatrices. The recent Vaccination Act is most detrimental to its efficient performance. Fortunately, the South Staffordshire Small-pox Hospital is directly at our doors if we are unfortunate enough to have a case.

DIARRHŒA AND ENTERITIS.

During the year 13 deaths from Diarrhœa and 13 deaths from Enteritis have been registered, together making a total of 26 deaths from diarrhœal disorders; of these 14 have been infants under one year of age, and 8 between one and five years of age.

Number of deaths during the past ten years from the two diseases combined :—

1899	...	3 deaths.	1904	...	52 deaths.
1900	...	73 „	1905	...	40 „
1901	...	60 „	1906	...	61 „
1902	...	41 „	1907	...	30 „
1903	...	25 „	1908	...	47 „
Average for ten years, 43.2.					
1909	...	26 deaths.			

I have noted during the year a more constant use of sweetened condensed milk as an article of diet for infants and very young children. When noticed I always remark upon it, there is an abundant supply of wholesome pure milk to be obtained at a very small cost and a minimum of trouble. It cannot be too well known that fresh milk is infinitely more suitable as an article of diet than milk of the best brands that has been lying in a tin, and that the less that milk is sweetened the better for the user. In the summer weather it is advisable, as a safeguard from diarrhoea and intestinal complaints to cook it in a porringer or to boil it. It is advisable not to eat any tinned foods during the summer, they rapidly decompose, and many cases of diarrhoea and enteritis are traceable to their use. Diarrhoea and enteritis cannot be traced to any one overwhelming cause, but to the very many disturbing causes from carelessness in sanitation or errors in diet.

PUERPERAL OR CHILDBED FEVER.

During the year 5 cases of puerperal fever have been notified, and 3 have died out of the total number of 1,068 women delivered. Each of these cases has been carefully inquired into, and a report sent to the Medical Officer of the County Council, who has supplemented the inquiry when necessary. More care and forethought is now being spent on the parturient woman and her surroundings than has ever been the case. Each registered midwife is periodically visited by the County Inspector of Midwives or her assistant. Her bag and instruments are carefully examined as to their cleanliness and suitability, her results are noted, and her surroundings are examined, so that the possibility of sepsis should be reduced to a minimum. In none of the cases that have been notified have I been able to attach blame to anyone. The advent of the registered midwife—trained and untrained—has materially diminished the number of confinements

attended by medical men, who now have only the more difficult cases to attend, and then very frequently without any fee at all.

1903 ... 2 deaths ... 1,137 births	1906 ... 1 deaths ... 1,112 births
1904 ... 1 ,, ... 1,114 ,,	1907 ... 1 ,, ... 1,094 ,,
1905 ... 1 ,, ... 1,072 ,,	1908 ... 1 ,, ... 1,150 ,,
1909 ... 3 deaths ... 1,068 births.	

SUMMARY OF SANITARY WORK.

During the year I have visited and reported upon the sanitary condition of 184 single houses, and of 23 houses in courts. I have analysed two samples of drinking water submitted to me by the Sanitary Inspector. On several occasions when rumours had been afloat as to an attempt to sell diseased or very poor meat in the Great Bridge Market, I have inspected—with the Sanitary Inspector—the whole of the meat offered for sale. I have made the required systematic inspection of portions of the district, arranging the district into sections, and with the Inspector have visited Milkshops, Dairies, Bakehouses, Factories, Workshops, and Slaughterhouses. One case only of unsound meat was referred to me in the very hot weather. This was amicably settled, as the butcher had evidently no desire to sell unsound meat (it was a heart which had become fly-blown in its cavities).

The Sanitary Inspector has referred in his report to the cases which have come under his jurisdiction. I have pleasure in stating that in him I have always found a most agreeable and painstaking co-worker, and from Mr. Jukes in the Surveyor's Department, and Mr. Stockdale, as Clerk, I have received much valuable assistance, given in a truly hearty manner.

I would call your attention to the following statistics required by the Local Government Board and the County Council.

TABLE SHEWING THE VITAL STATISTICS OF WHOLE DISTRICT
DURING 1909 AND PREVIOUS YEARS.

YEAR.	Population estimated to middle of each Year.	BIRTHS.		TOTAL DEATHS REGIS- TERED IN THE DISTRICT				TOTAL DEATHS IN PUBLIC INSTITUTIONS	Deaths of Non-resid'ts regist' red in Public In- stitut'ns in the District	Deaths of Resid'ts reg- ist'd in Public Institu- tions beyond District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT	
		Number	Rate	Under 1 Y'r of Age.		At all Ages					Number	Rate.
				Number	Rate per 1000 Births registered	Number	Rate.					
1	2	3	4	5	6	7	8	9	10	11	12	13
1899	30,000	1200	39·34	242	201	599	19·6				599	19·6
1900	31,000	1081	34·87	181	167	628	20·2				628	20·2
1901	30,543	1155	37·72	167	147	476	15·5				476	15·5
1902	31,000	1122	36·01	175	147	535	17·2	8			535	17·2
1903	31,250	1137	36·38	144	126	448	14·3	4			448	14·3
1904	31,250	1144	36·31	186	161	558	17·7	4			558	15·7
1905	31,250	1072	34·30	143	133	472	15·1	1		3	475	17·6
1906	31,250	1112	36·50	174	156	460	14·7			1	461	14·7
1907	33,000	1094	33·50	121	110	447	13·5	2		2	449	13·3
1908	33,000	1150	34·8	137	119	474	14·3	5		1	475	14·3
Averag's for years 1899-1908	31,354	1126	35·93	167	146	509	16·21				510	16·34
1909	33,000	1068	32·36	123	115	441	13·36	3		11	452	13·69

Total population at all ages	...	...	30,503
Number of inhabited houses	...	...	6,283
Average number of persons per house	...	...	4·86

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1909.

DISEASE.	At all Ages	Under 1 year	1 to 5	5 to 15	15 to 25	25 to 65	65 and upward	Remov- ed to Hospit'l
Diphtheria	26		7	9	5	5		
Membranous Croup...	5		4	1				
Erysipelas	37			2	4	27	4	
Scarlet Fever	94		34	56	3	1		63
Typhoid or Enteric ...	19			4	5	9	1	
Puerperal Fever	5				2	3		
Tuberculosis	13			1		11	1	6
Totals	199		45	73	19	56	6	69

TABLE SHEWING THE CAUSES OF AND NUMBER OF DEATHS
DURING THE YEAR 1909.

CAUSE OF DEATH.				All ages	Und'r 1 year	1 and und'r 5	5 and und'r 15	15 & und'r 25	25 & und'r 65	65 & up- ward
Measles	...	...	...	21	8	13				
Scarlet Fever	...	...	...	4		2	2			
Whooping Cough	...	...	...	2		1		1		
Diphtheria (including Membraneous Croup)	...	...	...	5		4	1			
Typhus Fever	...	...	...	1	1					
Enteric Fever	...	...	...	5	1		1		3	
Epidemic Influenza	...	...	...	3					1	2
Diarrhœa	...	...	...	13	7	4	1		1	
Enteritis	...	...	...	13	7	4			1	1
Puerperal Fever	...	...	...	3				1	2	
Phthisis (Pulmonary Tuberculosis)	...	...	...	19	2	1		2	14	
Other tuberculous diseases	...	...	...	18	5	11	1	1		
Cancer, malignant disease	...	...	...	18					13	5
Bronchitis	...	...	...	55	18	8	2	1	13	13
Pneumonia	...	...	...	27	1	4	5	1	11	5
Other Diseases of Respiratory Organs	...	...	...	3	3					
Alcoholism	...	...	...	2					2	
Premature Birth	...	...	...	13	13					
Diseases and Accidents of Parturition	...	...	...	3	1				2	
Heart Diseases	...	...	...	33	1		2	2	19	9
Accidents	...	...	...	16	2	5	3	1	5	
Suicides	...	...	...	3					2	1
All other causes	...	...	...	172	53	24	5	4	35	51
All Causes				452	123	81	23	14	124	87

Infantile Mortality during the Year 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.		Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total D'ths under One Year.
ALL CAUSES	Certified Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Common Infectious Diseases—</i>																		
Measles	...	...	...	...	...	...	...	...	1	...	...	2	...	...	1	2	2	8
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membraneous Croup	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Diarrhœal Diseases—</i>																		
Diarrhœa, all forms	...	...	...	1	...	...	...	2	3	1	...	...	...	...	...	...	...	7
Enteritis, Muco-enteritis, Gastro-enteritis	...	...	...	...	...	...	2	1	1	1	...	...	...	...	...	1	1	7
Gastritis, Gastro-intestinal Catarrh	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
<i>Wasting Diseases—</i>																		
Premature Birth	...	11	...	1	1	...	4	...	...	...	...	...	...	...	...	...	...	17
Congenital Defects	...	11	1	...	2	...	1	...	...	...	...	...	...	...	...	...	...	15
Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Atrophy, Debility, Marasmus	...	1	1	3	1	...	3	1	2	1	1	2	1	...	...	1	..	18
<i>Tuberculous Diseases—</i>																		
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Tuberculous Peritonitis:																		
Tabes Mesenterica	...	...	...	...	...	...	...	...	1	1	1	...	1	1	...	...	...	5
Other Tuberculous Diseases	...	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	2
<i>Other Causes—</i>																		
Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Convulsions	...	4	...	...	...	...	3	1	4	1	...	1	...	1	1	...	...	16
Bronchitis	...	...	...	...	...	...	1	...	2	4	...	1	2	1	2	5	...	18
Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pneumonia	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Causes	...	3	...	...	...	...	...	1	1	...	...	1	1	...	...	...	...	7
		30	2	5	4	...	14	6	15	9	3	9	4	5	5	9	3	123

Deaths from all Causes at all Ages, 452.

Population, 33,000.

SECOND ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER,

A. S. UNDERHILL, M.D., D.P.H.,

FOR THE YEAR ENDING DECEMBER 31st, 1909.



*To the Chairman and Members of the Tipton
Education Committee.*

56, Horseley Road,

Tipton,

January, 1910.

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in submitting to you a record of the work done by me as your School Medical Officer during the past year.

My Annual Report is to contain statements of local circumstances and conditions which are for the information of the Board of Education, and which would be superfluous if they were intended solely for the information of the Local Authority.

As a general rule the hygienic conditions prevalent in the schools are of a satisfactory nature. Much is wanted in some schools to improve the ventilation, warming and sanitation. This holds good principally with the older schools, all of which are more or less in need of being modernised.

In no case have I found anything directly detrimental to the health of the children who attend these schools, or anything likely to lower their vitality. My principal complaint to teachers has been a want of ventilation, and the difficulty is to keep the atmosphere anything like pure without causing a draught. In some of the schools the seats and tables are not suitable for the varying requirements of differences of height in the children, and the rows of seats are placed too close to each other, so preventing any possibility of air circulating round the individual seats. A more general use of Hopper windows would be advisable, and a better system of heating than by closed stoves and iron flues.

I have pleasure in stating that there has been a distinct improvement in the general cleanliness of the children as compared with last year. I am told by teachers that this is more marked for a few weeks after each inspection. Most of the teachers are now taking a more active interest in the hygiene of the children and their environment. I have often been surprised at the precise knowledge that they have of the home life of their children, and they have given me many useful hints respecting their actual condition and surroundings.

At other times than at my official inspection they have sent to me children suffering from suspicious rashes and probable contagious cases which might interfere with the health of others if they continued their attendance at school. These informal examinations make a very useful link between the school life and the Sanitary Committee of the Council to which I am Medical Officer of Health.

It is understood that on any morning I will see teachers or children at 10-30, at 56, Horseley Road, and give a necessary certificate where it is advisable to exclude a child from school attendance.

Difficulties have arisen in dealing with *optical defects* in the children, out of the 1,060 children whose vision was tested 103 were found with more or less defective eyesight, these require *special* eye testing and suitable spectacles to ensure good vision when the children grow up. To meet these difficulties the Education Committee have obtained permission from the Education Department to expend a certain amount of money in spectacles to be given to children whose parents

are unable to afford spectacles for them. The testing of eyes for the right kind of spectacle suitable for the particular case requires much experience and special knowledge obtainable only from experts, unsuitable spectacles are infinitely worse than no spectacles at all. At the Eye Department of the Guest Hospital and Dispensary, at Dudley, and at the West Bromwich District Hospital, specially trained experts attend to the eye cases and advise as to the special spectacles necessary for each case, but the difficulty arises as to how the out-patient notes for these departments are to be obtained, and at present this is a very serious difficulty. It is the duty of every parent who can afford it to consult an Eye Specialist when recommended by me, and to obtain from him the advice required to ensure the preservation of their children's sight. I always let them know (through the teachers) if there is any defect, and knowing of the defect, they should have it remedied. This, however, does not apply to the poor people, who cannot afford to pay for the advice, and I think that it should be a matter for full consideration as to how to deal with these cases. A possible key to the difficulty will be to arrange for an Eye Specialist to attend at some central place for two hours twice a month, and give him an honorarium for doing so. This course has been taken in many towns with excellent results. My duty is to test the eyesight of every child over six years of age, but farther than this I cannot go. I am told that not only are Eye Hospital notes most difficult to obtain, but if they are obtained, the number of cases sent from so large a district is so great that the Eye Departments cannot deal with the cases in a satisfactory manner. I would, therefore, strongly urge for your consideration the arrangement suggested, as I feel that the preservation of the eyesight is of the utmost importance in providing for the wellbeing of the children.

Advice as to the **treatment of "nits"** in the children's hair has been a somewhat delicate and difficult task. I have found many girls who otherwise have been quite clean and with clean heads whose hairs have been infested with "nits." I have adopted the plan of giving to each child whose head is verminous a leaflet in a sealed envelope to be given to the child's mother after school. This leaflet gives plain instructions as to the treatment generally of verminous heads, and suggesting that in any case of difficulty, application should be made to the district nurse who will gratuitously advise and

remove the trouble. Undoubtedly the best⁷⁹ of all plans is to cut the hair short, as experience has shown how seldom vermin are found on close cropped heads and how easily they are destroyed.

I have no precise information as to the exact number of children who have received surgical attendance in cases of enlarged tonsils, adenoids, and other minor surgical ailments, but from time to time I have heard that many parents have sought for and received surgical advice and treatment. The teacher gives each child who requires treatment a card on which is noted the ailment and advice as to consulting a medical man. When the child is obviously very poor and surgical treatment is necessary, they are advised to go to a Hospital.

As might be naturally expected the home surroundings and the social and industrial conditions of the children influence largely their health and physical fitness. In the poor districts inhabited principally by labourers and men who earn low wages the physical fitness of the children and their clothing cannot be compared with the children from the more favoured districts. Extreme poverty seems to foster a want of care and neglect, apart from criminal causes, and drunkenness. A widow with several children to support cannot be expected to be able to give them the same individual attention or the same amount of nourishing food that the more favoured mothers can give. In very many cases where I have called the teachers' attention to the dirty and neglected conditions of the children, they have told me that the mothers have to earn their living, or that the family is exceptionally large, or that prolonged want of work has so crippled the parents that it has become practically an impossibility to clothe or feed the children. Frequently this explanation from the teachers I have known to be true. I think that a more general use of the knowledge obtained from school teachers who live amongst the children would be conducive to a better and more economical distribution of charitable funds than many of the haphazard methods now adopted. Some mothers are lamentably ignorant as how to make the best of what they have. Much more can be done by judicious management without pauperization and the fatal trusting to charitable gifts. I think also that the visits of the district nurses and the instruction given by them in their daily work

will in time act as an education to the mothers and show them how much more they can do for their children's welfare than they now are doing.

In consequence of a severe outbreak of Measles during the months of May and June it was thought advisable to cleanse and disinfect the Infant's School, Burnt Tree. This was carried out under the direction of the Sanitary Inspector during the time that the school was closed (15 May to 28 May). The disease was of a very mild type. In the week preceding closure over 60% of the Infants were absent from school, either suffering from Measles themselves or living in houses which were infected. The epidemic of measles spread to the Dudley Port Schools. I found on July 17th that 74 were absent with Measles. After reporting the occurrence to the Chairman it was not thought advisable to close the Schools as the holidays were shortly coming on.

The question of organizing a *School Clinic* has not yet been officially considered, nor do I think that under existing circumstances such a Clinic would be advisable. There are abundant means for obtaining free medical attendance at the out-patient departments of our Hospitals, and at the Dudley Dispensary. The district is also well provided with Sick and Provident Clubs, the members of which can secure for themselves and their children all requisite medical treatment at a very low cost. The arrangement with the District Nurses' Home allows of free nursing and attention to minor surgical and medical necessities under the supervision of a qualified medical man. No parent can complain that they cannot readily find medical assistance if they are too poor to pay for it.

I have to report that I do not think much disturbance of the school arrangements has arisen during my inspection. I have not inspected any school on a day that was specially inconvenient to the school management. There is always more or less of a difficulty in providing a suitable room for the purpose. When there is a teachers' private room I have used this. In some cases I have been obliged to carry on the inspection in a room whilst a lesson was proceeding, a teacher keeping the children occupied whilst I inspected. In other schools I have used a class room, emptied for me by temporarily drafting the children into other classes. No real difficulty has ever arisen; arrangements more or less suitable have always been made.

The attendance of parents at the inspections has been very meagre. Notice is given to them through the children that the inspection will take place on a certain date, and that they can be present if they so wish. In only two cases during the year has any objection been raised to the examination. The principle upon which children have been selected for examination is that laid down by the 1908 Code, viz.:—All children of school age admitted during the year; all children likely to leave before August 1st, 1910. In addition, children are sent to me when for any special reason the teachers have thought it advisable to have them medically examined. During the year I have examined 1771 children. Each case has been treated on its own merits at the time of examination, and notice has been sent to parents pointing out the defects noticed, and advising them to consult their own Doctor, a Specialist, or when very poor, to apply for a note to the Parish Doctor or for a Hospital. A statement of the number of cases thus referred and classified is appended.

In reviewing the methods adopted for dealing with defects such as eyesight, nasal obstruction, or adenoids, tonsilitis, discharging ears, pediculosis, ringworm, and other minor skin diseases, the recent arrangements made with the district nurses will meet a great want, and several cases have already been referred to them for general hygienic treatment. Where medical treatment is obviously necessary and the parents are unable to obtain such treatment from poverty, I send them a card noting the physical defect and advise Hospital treatment. If they can afford it I advise them to consult their medical attendant and be guided by his advice. I have the advantage of having a sub-committee who will deal with any case of wilful or criminal neglect, and from them I expect in the future much help in difficult cases, such as dealing with chronic disease and pediculosis, when repeated warnings have been given without effect.

All cases of **infectious disease** are at once dealt with by the Sanitary inspector. The teachers report to me a probable case, I investigate it, and the child is dealt with either by removal to the hospital or by separation. In the infants' departments no child from a house infected with measles is allowed in school. In the upper schools each case is treated on its merits, as a rule most of these children have already suffered from measles, and absence from school is not so imperative. In Scarlatina cases no child from an infected

house should go to school until two weeks has elapsed since there was contact, and not then unless the infected child has been removed to the hospital. This rule is the generally adopted one, and is under the supervision of the Sanitary Inspector. With Whooping Cough, no child is allowed in school who has the characteristic cough. Other infectious diseases are dealt with as they arise and come under my observation. I will always give a certificate, upon application, when a child has had no medical attendance, and when any question arises as to the fitness or otherwise of a child's return to school with other children.

We have at present, outside of Charitable Institutions, no method for dealing with blind, deaf, physically or mentally defective children, or epileptics. Several mentally defective and epileptic children have been mentioned to me, and I have advised that as long as they do not interfere with the training or the comfort of the other children they might attend school.

I have no knowledge of any instruction now being given in public hygiene in our Elementary Schools, but I think that such instruction would be most beneficial. Temperance is advocated by several societies, which have, I am told, a large number of members. On fine days I have noticed that some of the classes have been held in the open air, and in most of the schools drill and manual exercises are taught. As a rule the children march out of school in a very creditable manner, either with or without a march played on the harmonium.

TEACHERS, &c.

I am greatly indebted to the teachers for the assistance that they have uniformly given me in the performance of my duties. Most of them have shewn a distinct interest in the work, and a desire not only to make the examination as efficient as possible, but have furnished me with many details about the children and their home influence which has shewn that they take personal interest in their children's welfare. Over and above the professional performance of their duties, they arrange the children's dress, marshal them in order, enter the particulars on their duplicate card, and make as full enquiry as possible from the parents as to the history of disease and sickness in them and in their family. This history I have not made use of for any statistical purposes,

the data are not sufficiently accurate as to be of any real assistance ; they have, however, been of occasional use in some exceptional cases. I consider that the help given by the teachers has saved the necessity for a School Nurse, as no nurse could have done better than they have. Many of the children are quite helpless in the matter of the loosening of their clothes and re-dressing themselves ; besides, in many cases the clothes are either pinned together or are roughly sewn on, to save trouble of buttons, hooks and eyes.

My experience of this year's examinations is similar to that of last year. The worst feature of the child's clothing is the want of proper footwear. Many of the boots are in a shocking condition : not of a suitable size, worn out, and not watertight. On wet days children have to sit during the lesson with footwear soaked through with wet. Their socks are often in a deplorable condition, and occasionally we find that the leg part of the sock is left, but the foot part is worn away. In no way, I think, could charitable assistance be more wisely given than in providing suitable footwear to the children whose cases are known to the teachers as being really necessitous cases, and where the want arises from real poverty and not from the culpable negligence of the parents.

SOCIAL CIRCUMSTANCES OF THE CHILDREN AND THEIR SURROUNDINGS.

Practically all of the children are of the working and the smaller tradesman classes. In their homes the average number of bedrooms is two, with one room downstairs. There are, however, many houses with three bedrooms and a few with only one, lately the fashion has been to have two small rooms in place of one large one—a retrograde method of house building—we have not many courts and there is but little overcrowding. All houses have an ample supply of pure water and as a rule are surrounded with a free current of air. Landlords with or without compulsion keep their houses in a tenantable condition. The drains empty themselves either into the sewer, if there is one convenient, or by open drains on to the main road drains. For general sanitary purposes, the children live with better sanitary surroundings than would be possible in a Town where land is more valuable. Much of the insanitation when found is due to neglect on the part of

tenants in not keeping the drains clear, and not opening the windows sufficiently often to ensure proper ventilation. Their drinking water is supplied by the South Staffordshire Water Works Company. Very few of the married women are as yet employed in the factories.

SANITARY CONDITION OF SCHOOLS.

Most of the schools are well equipped with class rooms well ventilated, with plenty of light, with modern appliances and sanitary arrangements, with an abundant supply of pure water, and with play grounds ample for the children's amusements. The style of desk in some of the schools is antiquated and not sufficiently convenient for anything like comfort for the children who use them. The class of desk used and the position in which they are placed has a distinct hygienic influence over the welfare of the children. To avoid the tendency to stooping, to keep the body erect, to avoid overstraining of the eyes, the desks should be of convenient height, furnished with a back rest and movable foot board; the top of the desk made so that it can be easily inclined, and the desks not placed too near to each other so that an unimpeded current of air can circulate round the children when at work. In a few schools the method of warming is very antiquated, a sensation of hot stuffiness pervades the atmosphere if the windows are not sufficiently kept open. The cost of details for the improvements of school hygiene is very great, but year by year something is being done towards perfection. At present School Managers seem to have their hands full with the requirements of H.M. Inspectors of Schools, and this has made me somewhat reticent in my reports to the Education Committee.

Yours faithfully,

A. S. UNDERHILL,

School Medical Officer.

**Tables shewing in an accessible form the Details
Required by the Education Committee.**

TOTAL NUMBER OF CHILDREN EXAMINED 1771.

Boys 897.

GIRLS 874.

						Average Height.			Average Weight.		
						Ft.	Ins.	M. C.M.	Lbs.	Kg.	Hg.
Boys between 4 and 5 years examined						3	2 $\frac{5}{8}$	98	35	15	9
„	„	5	„	6	„	3	4	1 1 $\frac{1}{2}$	37 $\frac{1}{2}$	17	0
„	„	6	„	7	„	3	5 $\frac{1}{4}$	1 4 $\frac{1}{2}$	41 $\frac{1}{4}$	18	7
„	„	7	„	8	„	3	7 $\frac{3}{4}$	1 11	45 $\frac{1}{2}$	20	7
„	„	8	„	9	„	3	9 $\frac{3}{4}$	1 16 $\frac{1}{2}$	47 $\frac{3}{4}$	21	7
„	„	9	„	10	„	4	1 $\frac{1}{8}$	1 24 $\frac{1}{2}$	53 $\frac{1}{4}$	24	2
„	„	10	„	11	„	4	1 $\frac{7}{8}$	1 27	55 $\frac{1}{2}$	25	1
„	„	11	„	12	„	4	3 $\frac{1}{2}$	1 31	62	28	1
„	„	12	„	13	„	4	5 $\frac{5}{8}$	1 36	70	31	8
„	„	13	„	14	„	4	8	1 42	80 $\frac{1}{2}$	36	4
„	„	14	„	15	„	4	10 $\frac{1}{4}$	1 22	58 $\frac{3}{4}$	26	7
GIRLS between 4 and 5 years examined						3	3 $\frac{1}{4}$	99	35 $\frac{1}{2}$	16	1
„	„	5	„	6	„	3	3 $\frac{5}{8}$	1 0 $\frac{1}{2}$	36	16	3
„	„	6	„	7	„	3	5 $\frac{1}{2}$	1 5 $\frac{1}{2}$	39 $\frac{1}{2}$	17	9
„	„	7	„	8	„	3	8 $\frac{1}{4}$	1 13	47 $\frac{1}{2}$	21	6
„	„	8	„	9	„	3	10	1 17	48	21	8
„	„	9	„	10	„	3	11 $\frac{1}{2}$	1 21	53	24	1
„	„	10	„	11	„	4	1 $\frac{3}{4}$	1 26 $\frac{1}{2}$	57 $\frac{1}{2}$	26	1
„	„	11	„	12	„	4	4 $\frac{3}{8}$	1 33 $\frac{1}{2}$	78 $\frac{1}{4}$	38	5
„	„	12	„	13	„	4	8 $\frac{5}{8}$	1 43 $\frac{1}{2}$	77	34	9
„	„	13	„	14	„	4	8	1 42 $\frac{1}{4}$	73	33	1
„	„	14	„	15	„	4	7 $\frac{1}{2}$	1 41	73 $\frac{1}{4}$	33	2

BOYS.

NUTRITION.

V.G. and Good	542
Normal ...	317
Below Normal	38

897

GIRLS.

NUTRITION.

V.G. and Good	540
Normal ...	285
Below Normal	49

874

BOYS.

HEAD.

Clean ...	...	834
Verminous	...	11
Dirty	...	52
		<hr/>
		897
		<hr/>

BODY.

Clean ...	...	757
Verminous	...	50
Dirty ...	...	90
		<hr/>
		897
		<hr/>

TONSILS.

Normal	...	825
Enlarged	...	72
		<hr/>
		897
		<hr/>

ADENOIDS.

18 Cases.

VISION.

Examined	...	556
Below Normal		49
		<hr/>
		517
		<hr/>

TEETH.

Normal	...	343
Carious	...	545
Irregular	...	9
		<hr/>
		897
		<hr/>

MENTAL CONDITION.

Bright...	...	252
Fair	...	533
Dull	...	112
		<hr/>
		897
		<hr/>

GIRLS.

HEAD.

Clean ...	...	343
Verminous	...	528
Dirty ...	...	3
		<hr/>
		874
		<hr/>

BODY.

Clean ...	...	759
Verminous	...	89
Dirty	...	26
		<hr/>
		874
		<hr/>

TONSILS.

Normal	...	771
Enlarged	...	103
		<hr/>
		874
		<hr/>

ADENOIDS.

27 Cases.

VISION.

Examined	...	502
Below Normal		54
		<hr/>
		448
		<hr/>

TEETH.

Normal	...	301
Carious	...	573
		<hr/>
		874
		<hr/>

MENTAL CONDITION.

Bright	...	284
Fair	...	479
Dull	...	111
		<hr/>
		874
		<hr/>

DEFORMITIES.

Deformed ...	3
Both Legs ...	1
Lost Leg through Accident ...	1
Chest Contracted	1
Curvature of Spine	1
Hip Disease ...	1
Pigeon Chested	6
	<hr/>
	14
	<hr/>

DEFORMITIES.

Deformed ...	1
Curvature of Back	1
Imbecile ...	1
Hip-joint ...	1
Round Shouldered	1
Small for Age	1
Pigeon Breasted	2
	<hr/>
	8
	<hr/>



SANITARY INSPECTOR'S REPORT.

Inspector's Office,

Owen Street, Tipton,

February, 1910.

REMOVAL OF NIGHT SOIL AND ASHES.

This part of my report, dealing with refuse removal, always comes first, owing to its great importance. During the year a large amount of work has been done, the district has been kept fairly clean, and the complaints of non-removal of refuse have been few indeed considering the increase of sanitary dust-bins in various parts of our town.

I am often perplexed in the height of the summer and scarcely know what to do with the large amount of night soil for disposal—still, last year being a wet season, I managed fairly well. Our men visited 12,438 houses, and removed from 8,529 privy cesspits excremental refuse during the night. Our men, during the day, have visited 20,409 houses, and emptied 7,378 ashpits. The work at the present time is well maintained and in good order.

NOTIFICATION OF INFECTIOUS DISEASE AND DISINFECTION.

During the year a slight increase in the number of notified diseases has been received, and has had the usual prompt attention.

63 cases of Scarlet Fever have been removed to the Hospital, and 6 cases of Typhoid Fever have also been removed. Our system whereby the whole of the work is done by the Council's staff is in every way satisfactory.

31 sleeping rooms and the Burnt Tree Council Infants' Schools have been fumigated during the year, including several library books, one being destroyed; these came from our Central Library.

PETROLEUM ACTS.

We have on our register nine Petroleum License Holders. The premises are visited from time to time, and they comply with the Acts.

DAIRIES, COWSHEDS, AND MILKSHOPS.

These premises are visited by the Sanitary Officers, and usually whatever defect is discovered is soon put right, no complaints being made to the Council during the year. On the whole these places, with a few exceptions, have little to complain about; still, one would like to see modern methods adopted where possible.

The number of Cowsheds on our register is	50
„ „ „ Milkshops „ „ „	45

SLAUGHTER-HOUSES AND MEAT INSPECTION.

The Slaughter-Houses in our district are usually kept in good order, and where possible the old ones, if not used for some considerable time, are struck off our register. In this way two have disappeared during the year.

One new Slaughter-house has been erected. I have condemned 22 tubercular pigs, and 2 pigs affected with measles (cysticerci) and portions of tubercular beef were seized and destroyed during the year.

One pig was discovered to be dead in a railway truck, and was buried by our men.

The markets have been visited at all times, and the food exposed for sale inspected.

I desire to acknowledge the ready help given to me by the Medical Officer of Health, either inspecting markets or slaughter-houses.

Number of Slaughter-houses on our register is 24.

HOUSING OF THE WORKING CLASSES ACTS.

During the year much useful work has been done, many houses have been repaired, limewashed, and re-papered.

I have been compelled to go to the Court on many occasions when the owners failed to comply after repeated notice had been given.

The following are cases brought before the magistrates for closing orders:—

House 3 in Court 6, Queens Road.

„ 5 „ 4 „ „

62a, Bridge Road.

64 to 67, Aston Street.

37, Newhall Street.

Court 13, New Road (12 Houses).

57, 58, and 65, Ballfields.

8 to 12, Walker Street.

76 to 79, High Street, Princes End.

27 to 30, Coneygree Road.

6 in court 10, Horseley Heath.

Summonses issued in respect of various nuisances on premises as follows:—

56 to 65, Ballfields. Houses dirty.

Court 9, Bloomfield Road. No proper ashpit.

67, Bridge Road. House dirty and out of repair.

18c, New Cross Street. House dirty and out of repair, and no water provided.

60, Ballfields. Overcrowding.

A proper supply of water has been laid on to property at 5 to 12a, Tudor Street, 18c, New Cross Street, 1 Court Horseley Road, and Court 14 Dudley Port.

The following houses have been demolished and the sites cleared, at my request:—

House 4 in Court 2, Chapel Street.

Rowley's Buildings in Old Cross Street.

Houses 68 to 70, Aston Street, and Court 11 Bloomfield Road, have been closed voluntarily.

CANAL BOAT ACTS.

120 boats were inspected during the year. Fourteen complaint notes have been sent out to various owners calling their attention to contraventions of the acts and regulations.

The boats were fairly clean and habitable.

Summary of Infringements.

Marking	...	...	...	...	3
Without Water Vessels	...	...	...	...	2
Paint Work Dirty	...	...	...	...	3
Without Certificate	...	...	...	...	4
Overcrowding	...	..	...	...	1
					<hr/>
					13
					<hr/>

No case of infectious disease or any obstruction met with.

Owen J. Llewellyn, Esq., H.M. Chief Inspector has made his annual inspection of the work done which was to his entire satisfaction.

FACTORY AND WORKSHOPS ACT, 1901.

The work under this head has been carried out during the year with considerable success. The workshops are well kept; improvements in the existing sanitary conveniences have been effected, and new ones provided for the use of females. Delay often arises because we are unable to fix the responsibility on the proper person, more especially in the case where breeze banks exist. Such a case has been going on for months, and now I have threatened both owner and occupier that legal proceedings will be taken.

In the Dudley Port district ten waterclosets have taken the place of old privies, to the advantage of the workpeople. Other conveniences have been improved by repairs and limewashing. On the whole the conditions show a great improvement. The complaints received from H.M. Inspector have been few during the year, and these are having attention at the present time. We have only a few homeworkers, and no work is sent out of our district to be made up elsewhere.

I am pleased to say that no case of infectious disease occurred in any workshop during the past twelve months.

The number of Workshops on our register is...								135
„	„	„	Factories	„	„	„	„ ...	57
„	„	„	Workplaces	„	„	„	„ ...	5
„	„	„	Bakehouses	„	„	„	„ ...	22

				Number of		Abatement Notice		Nuisances Abated After Notice by	
				Inspections & Observations made.	Defects Found.	Informal by Inspect'r	Formal by Authority.	Inspector.	Authority.
Dwelling Houses and Schools.	{	Foul Conditions	...	149	149	149	100	100	30
		Structural Defects	...	149	140	149	40	100	30
		Overcrowding	...	20	...	20	...	20	...
		Unfit for Habitation	...	45	45	...	45	...	45
		Dairies and Milkshops	...	120	...	...	...	...	...
		Cowsheds	...	120	...	...	...	...	...
		Bakehouses	...	88	4	4	...	...	...
		Slaughterhouses	...	100	2	...	...	...	...
		Canal Boats	...	120	...	11	...	...	...
		Ashpits and Privies	...	150	150	150	...	150	...
House Drainage.	{	Deposits of Refuse & Manure	...	40	40	40	...	20	10
		Water Closets	...	12	12	12	...	12	...
		Defective Traps	...	10	10	10	...	10	...
		No Disconnection	...	12	12	12	...	12	...
		Pigsties	...	10	10	10	...	10	...
		Animals improperly kept	...	40	40	40	...	40	...
		Offensive Trades	...	2	2	2	...	1	1
		Smoke Nuisances	...	2	2	2	...	1	1
		Other Nuisances	...	20	20	20	...	20	...
				1209	658	631	185	484	117

Yours truly,

CHAS. H. CLIFTON, C.S.I.,

(Asso. R. San. Inst.),
Sanitary Inspector.

SURVEYOR'S REPORT.

Report on Work in Surveyor's Department for the
year ending December 31st, 1909.

Surveyor's Offices,

Owen Street,

23rd February, 1910.

A. S. UNDERHILL, Esq., M.D., D.P.H.

Dear Sir,

I have pleasure in forwarding you some particulars of the work carried out in my department for the year ending December 31st, 1909.

Plans of New Houses approved by the Council	44
„ Alterations „ „ „	7
„ New Scullery, Bedroom and Bath Room	1
„ Alterations at Works	1
„ New Offices	1
„ New Bakehouses	1

From the above it will be seen that we have not had a very busy year as far as Building Operations have been concerned, owing, no doubt, to the depressed condition of trade generally. The most important Scheme commenced during the year has been the re-construction and re-modelling of the Outfall Works and upon which very great progress has been made. The first section of the Scheme of Deep Sewers has also been given out and when this is completed the Main Sewer will be constructed from the Outfall Works to the Boundary at Burnt Tree. Other Sections of the work will come on in due course. I am pleased to report that the Council have not had to commence any relief works for the benefit of the unemployed, although there are still a good many cases, but the distress has not been nearly so great as last winter. A most important and necessary extension has been made at the Public Offices and all the Officials are now provided with good and ample accommodation. The want of proper accommodation in the Clerk's and my own department

previously have caused much inconvenience, but I am pleased to say this has been entirely removed and we have now a public building which is up to date in every respect, and I believe the Scheme has given entire satisfaction. A good improvement has also been carried out at the top of Owen Street and Factory Road and every one must admit that it has been well worth the money spent upon it. The Council have also applied for a loan for a Caretaker's House at the rear of the Public Offices, and also for laying down a small Tarred Macadam Plant at the Gas Works, both of which will be found very advantageous; and I am hoping that both of these schemes will be in hand very shortly, and that I shall be able to improve the condition of our roads during the present year. It has been unfortunate that the Local Government Board have taken so long to consider our application for this loan, as my object was to have had this Plant finished before the end of the year, so that we could have prepared a large quantity of Tarred Macadam, and had some ready for laying down by May or June this year, but the delay has quite prevented this, and I am afraid that very little will be actually laid down during this year. We have also completed the remaining portion of the pitching round the Park Lake, and everyone will admit that this is a great improvement. The work should have been done in this manner in the first instance. There is also a scheme on hand for improving and covering in the Brook-course at Great Bridge, and if this can be done it will effect a much needed improvement. The great event of the year, and, in fact, a notable event in the history of Tipton, was undoubtedly the visit of Princess Marie Louise of Schleswig-Holstein to open the Nurses' Home. I think Tipton did itself credit on that day, and everyone seemed willing and eager to give a helping hand to make the day a memorable one. The scene at the Park at night during the display of fireworks was a very pretty one, and proved what an ideal spot it was for a similar display in the future.

I am,

Yours sincerely,

WM. H. JUKES,

Engineer and Surveyor.

